



City of Wheatland

111 C Street, Wheatland, CA 95692

Phone #: 530-633-2761 Fax #: 530-633-9102

WATER & SEWER SERVICE APPLICATION

- | | | |
|---|---|--------------------------------|
| <input type="checkbox"/> Property Owner | <input type="checkbox"/> Temporary Shut Off | <input type="checkbox"/> Water |
| <input type="checkbox"/> New Account/Renter | <input type="checkbox"/> Re-Connect \$40.00 fee | <input type="checkbox"/> Sewer |
| <input type="checkbox"/> New Account/Home Owner | <input type="checkbox"/> L/O Spreadsheet | |
| <input type="checkbox"/> Cancellation | <input type="checkbox"/> UB Master | |
| <input type="checkbox"/> Name Change | | |
| <input type="checkbox"/> Change of Address | | |
| <input type="checkbox"/> Realtor | | |

PLEASE COMPLETE ALL SECTIONS

Name: _____
(PRINT NAME)

Location Address: _____

Phone: _____

Mailing Address: _____

Social Security Number: _____

Responsible Billing Party: _____

Property Owner Name: _____

Property Owner Address: _____

Property Owner Phone: _____

Date of Service Desired: _____

Applicant hereby agrees that the water and sewer services will be accepted in accordance with the rules and regulations of the City of Wheatland now and hereinafter in effect, and monthly payments for said services shall be to the City of Wheatland, Wheatland, CA.

Signature: _____ Date: _____

*****FOR OFFICE USE ONLY*****

Date Entered: _____ Entered By: _____